SERVICE CATEGORY	PA-OAS	PA-AB	PA-ATD	PA-AFDC	LT-OAS	LT-AB
PHYSICIANS	\$36,512,250	\$8,234,040	\$312,558,640	\$67,494,500	\$3,339,090	\$77,380
OTHER MEDICAL	\$62,544,560	\$14,946,850	\$399,746,660	\$163,694,510	\$5,631,150	\$327,420
COUNTY OUTPATIENT	\$1,057,410	\$517,700	\$22,527,410	\$4,254,620	\$80,250	\$310
COMMUNITY OUTPATIENT	\$20,864,790	\$4,037,900	\$171,410,390	\$35,683,920	\$1,201,680	\$17,350
PHARMACY	\$281,596,960	\$29,631,610	\$1,232,954,250	\$76,875,880	\$53,523,180	\$454,990
COUNTY INPATIENT	\$6,142,590	\$1,687,510	\$120,577,450	\$24,379,020	\$1,172,190	\$22,860
COMMUNITY INPATIENT	\$150,439,870	\$25,554,800	\$889,606,740	\$208,339,910	\$17,965,870	\$172,590
NURSING FACILITIES	\$418,924,210	\$28,185,800	\$646,681,240	\$2,856,040	\$1,843,733,170	\$7,953,880
ICF-DD	\$303,580	\$9,925,070	\$184,163,820	\$1,162,270	\$13,546,130	\$3,294,950
MEDICAL TRANSPORTATION	\$16,545,110	\$5,067,440	\$60,357,080	\$5,147,720	\$4,475,620	\$162,670
OTHER SERVICES	\$294,788,950	\$17,698,420	\$345,907,680	\$30,326,560	\$62,719,360	\$263,870
HOME HEALTH	\$191,230	\$12,357,550	\$93,233,480	\$3,235,750	\$2,270	\$0
FFS SUBTOTAL	\$1,289,911,500	\$157,844,690	\$4,479,724,840	\$623,450,700	\$2,007,389,970	\$12,748,270
DENTAL	\$41,092,260	\$2,548,440	\$91,835,820	\$133,163,480	\$5,127,580	\$30,700
TWO PLAN MODEL	\$16,008,740	\$5,799,740	\$420,010,070	\$948,373,770	\$0	\$0
COUNTY ORGANIZED HEALTH SYSTEMS	\$140,073,330	\$13,720,750	\$466,298,920	\$150,290,450	\$188,692,250	\$863,340
GEOGRAPHIC MANAGED CARE	\$5,423,020	\$1,344,080	\$97,475,840	\$156,407,850	\$0	\$0
PHP & OTHER MANAG. CARE	\$42,706,690	\$2,649,620	\$115,157,790	\$10,955,200	\$0	\$0
EPSDT SCREENS	\$0	\$0	\$0	\$19,377,830	\$0	\$0
MEDICARE PAYMENTS	\$586,120,060	\$37,818,360	\$1,056,048,190	\$0	\$88,061,230	\$1,365,280
STATE HOSP./DEVELOPMENTAL CNTRS.	\$1,741,230	\$2,370,610	\$95,162,260	\$7,210,310	\$5,201,220	\$919,100
MISC. SERVICES	\$461,731,660	\$28,525,570	\$1,744,890,720	\$1,360,350	\$0	\$0
NON-FFS SUBTOTAL	\$1,294,896,980	\$94,777,180	\$4,086,879,610	\$1,427,139,240	\$287,082,280	\$3,178,420
TOTAL DOLLARS (1)	\$2,584,808,480	\$252,621,860	\$8,566,604,450	\$2,050,589,940	\$2,294,472,250	\$15,926,690
ELIGIBLES ***	389,900	24,400	884,400	1,276,500	48,100	200
ANNUAL \$/ELIGIBLE	\$6,629	\$10,353	\$9,686	\$1,606	\$47,702	\$79,633
AVG. MO. \$/ELIGIBLE	\$552	\$863	\$807	\$134	\$3,975	\$6,636

⁽¹⁾ Does not include Audits & Lawsuits, Recoveries, and Mental Health Services.

Excluded policy changes: 32. Refer to page following report for listing.

Last Refresh Date: 05/10/2006 CY Page 13 of 17

^{***} Eligibles include the estimated impact of eligibility policy changes.

SERVICE CATEGORY	LT-ATD	MN-OAS	MN-AB	MN-ATD	MN-AFDC	MI-C
PHYSICIANS	\$5,761,710	\$51,270,650	\$521,710	\$52,607,870	\$274,626,250	\$34,594,680
OTHER MEDICAL	\$5,881,640	\$62,458,830	\$1,396,230	\$87,610,740	\$379,883,830	\$63,410,480
COUNTY OUTPATIENT	\$271,910	\$3,904,300	\$47,050	\$7,698,560	\$19,534,950	\$2,324,940
COMMUNITY OUTPATIENT	\$1,209,080	\$18,107,450	\$137,220	\$24,745,500	\$100,142,460	\$13,919,100
PHARMACY	\$26,958,940	\$124,546,680	\$733,760	\$149,174,220	\$148,049,740	\$28,420,670
COUNTY INPATIENT	\$12,351,270	\$18,554,930	\$352,400	\$110,187,570	\$168,731,850	\$15,691,950
COMMUNITY INPATIENT	\$28,019,810	\$89,963,480	\$1,446,740	\$209,381,270	\$872,618,010	\$95,722,010
NURSING FACILITIES	\$449,125,590	\$187,228,920	\$1,513,240	\$66,779,750	\$18,482,610	\$8,967,560
ICF-DD	\$172,790,170	\$9,080	\$0	\$5,750,300	\$808,280	\$2,471,990
MEDICAL TRANSPORTATION	\$2,397,550	\$9,545,730	\$387,750	\$12,082,110	\$11,991,570	\$1,762,890
OTHER SERVICES	\$12,160,890	\$77,864,500	\$248,630	\$44,182,290	\$70,485,990	\$8,495,200
HOME HEALTH	\$56,660	\$749,110	\$5,100	\$41,718,970	\$7,176,850	\$6,189,660
FFS SUBTOTAL	\$716,985,220	\$644,203,660	\$6,789,830	\$811,919,120	\$2,072,532,380	\$281,971,120
DENTAL	\$1,555,670	\$19,416,360	\$61,410	\$11,095,060	\$305,810,260	\$24,779,660
TWO PLAN MODEL	\$0	\$14,358,650	\$0	\$19,805,810	\$1,722,898,030	\$30,951,070
COUNTY ORGANIZED HEALTH SYSTEMS	\$77,067,460	\$75,283,650	\$262,800	\$72,178,610	\$330,547,520	\$16,551,840
GEOGRAPHIC MANAGED CARE	\$0	\$2,608,570	\$0	\$5,021,790	\$190,644,680	\$7,384,990
PHP & OTHER MANAG. CARE	\$0	\$20,183,070	\$57,480	\$13,904,860	\$24,804,630	\$1,913,290
EPSDT SCREENS	\$0	\$0	\$0	\$0	\$42,201,820	\$3,656,520
MEDICARE PAYMENTS	\$20,069,750	\$114,821,940	\$1,365,280	\$93,112,920	\$0	\$0
STATE HOSP./DEVELOPMENTAL CNTRS.	\$241,529,900	\$105,950	\$282,520	\$2,163,470	\$9,827,790	\$3,908,880
MISC. SERVICES	\$0	\$217,965,920	\$687,360	\$211,651,000	\$3,123,860	\$253,130
NON-FFS SUBTOTAL	\$340,222,780	\$464,744,110	\$2,716,860	\$428,933,530	\$2,629,858,590	\$89,399,370
TOTAL DOLLARS (1)	\$1,057,208,000	\$1,108,947,770	\$9,506,680	\$1,240,852,660	\$4,702,390,970	\$371,370,490
ELIGIBLES ***	14,800	201,500	600	110,300	2,934,200	244,500
ANNUAL \$/ELIGIBLE	\$71,433	\$5,503	\$15,844	\$11,250	\$1,603	\$1,519
AVG. MO. \$/ELIGIBLE	\$5,953	\$459	\$1,320	\$937	\$134	\$127

⁽¹⁾ Does not include Audits & Lawsuits, Recoveries, and Mental Health Services.

Excluded policy changes: 32. Refer to page following report for listing.

Last Refresh Date: 05/10/2006 CY Page 14 of 17

^{***} Eligibles include the estimated impact of eligibility policy changes.

SERVICE CATEGORY	MI-A	REFUGEE	OBRA	POV 185	POV 133	POV 100
PHYSICIANS	\$5,895,600	\$436,190	\$27,945,170	\$168,187,310	\$3,436,010	\$3,825,250
OTHER MEDICAL	\$4,867,010	\$696,160	\$36,232,470	\$154,263,270	\$12,297,880	\$6,338,280
COUNTY OUTPATIENT	\$461,450	\$67,370	\$2,662,870	\$5,923,550	\$291,670	\$254,550
COMMUNITY OUTPATIENT	\$1,667,160	\$98,920	\$7,239,310	\$26,198,590	\$2,259,570	\$2,233,060
PHARMACY	\$4,409,830	\$446,650	\$10,702,690	\$12,955,980	\$3,102,360	\$2,578,720
COUNTY INPATIENT	\$3,034,040	\$29,240	\$40,631,920	\$45,798,260	\$831,430	\$1,498,210
COMMUNITY INPATIENT	\$17,669,210	\$439,450	\$93,256,030	\$320,667,910	\$8,832,260	\$11,531,350
NURSING FACILITIES	\$30,305,150	\$0	\$21,155,660	\$0	\$0	\$0
ICF-DD	\$1,741,190	\$0	\$641,380	\$0	\$0	\$0
MEDICAL TRANSPORTATION	\$498,640	\$9,910	\$2,790,110	\$1,782,720	\$242,230	\$233,220
OTHER SERVICES	\$1,161,180	\$70,510	\$2,177,480	\$6,924,420	\$2,490,210	\$2,116,390
HOME HEALTH	\$47,240	\$4,810	\$169,740	\$819,960	\$662,750	\$437,650
FFS SUBTOTAL	\$71,757,690	\$2,299,220	\$245,604,830	\$743,521,970	\$34,446,370	\$31,046,680
DENTAL	\$521,970	\$1,199,000	\$133,010	\$144,010	\$7,582,450	\$8,251,500
TWO PLAN MODEL	\$2,614,300	\$1,013,460	\$0	\$33,785,290	\$65,553,480	\$27,770,880
COUNTY ORGANIZED HEALTH SYSTEMS	\$5,198,150	\$208,800	\$3,480,840	\$16,295,190	\$19,328,670	\$10,809,950
GEOGRAPHIC MANAGED CARE	\$322,420	\$88,080	\$0	\$6,414,250	\$9,915,390	\$6,822,900
PHP & OTHER MANAG. CARE	\$37,280	\$0	\$0	\$1,454,690	\$790,850	\$635,000
EPSDT SCREENS	\$0	\$0	\$0	\$0	\$1,575,140	\$1,226,550
MEDICARE PAYMENTS	\$0	\$0	\$0	\$0	\$0	\$0
STATE HOSP./DEVELOPMENTAL CNTRS.	\$191,960	\$31,900	\$443,040	\$703,400	\$0	\$388,460
MISC. SERVICES	\$4,250	\$0	\$0	\$165,030	\$21,690	\$17,450
NON-FFS SUBTOTAL	\$8,890,330	\$2,541,240	\$4,056,880	\$58,961,860	\$104,767,680	\$55,922,700
TOTAL DOLLARS (1)	\$80,648,030	\$4,840,460	\$249,661,710	\$802,483,830	\$139,214,050	\$86,969,370
ELIGIBLES ***	4,600	2,000	69,100	191,900	100,500	82,000
ANNUAL \$/ELIGIBLE	\$17,532	\$2,420	\$3,613	\$4,182	\$1,385	\$1,061
AVG. MO. \$/ELIGIBLE	\$1,461	\$202	\$301	\$348	\$115	\$88

⁽¹⁾ Does not include Audits & Lawsuits, Recoveries, and Mental Health Services.

Excluded policy changes: 32. Refer to page following report for listing.

Last Refresh Date: 05/10/2006 CY Page 15 of 17

^{***} Eligibles include the estimated impact of eligibility policy changes.

SERVICE CATEGORY	TOTAL
PHYSICIANS	\$1,057,324,290
OTHER MEDICAL	\$1,462,227,980
COUNTY OUTPATIENT	\$71,880,860
COMMUNITY OUTPATIENT	\$431,173,460
PHARMACY	\$2,187,117,100
COUNTY INPATIENT	\$571,674,680
COMMUNITY INPATIENT	\$3,041,627,320
NURSING FACILITIES	\$3,731,892,820
ICF-DD	\$396,608,210
MEDICAL TRANSPORTATION	\$135,480,070
OTHER SERVICES	\$980,082,510
HOME HEALTH	\$167,058,760
FFS SUBTOTAL	\$14,234,148,060
DENTAL	\$654,348,640
TWO PLAN MODEL	\$3,308,943,300
COUNTY ORGANIZED HEALTH SYSTEMS	\$1,587,152,510
GEOGRAPHIC MANAGED CARE	\$489,873,870
PHP & OTHER MANAG. CARE	\$235,250,460
EPSDT SCREENS	\$68,037,850
MEDICARE PAYMENTS	\$1,998,783,000
STATE HOSP./DEVELOPMENTAL CNTRS.	\$372,182,000
MISC. SERVICES	\$2,670,398,000
NON-FFS SUBTOTAL	\$11,384,969,630
TOTAL DOLLARS (1)	\$25,619,117,690
ELIGIBLES ***	6,579,500
ANNUAL \$/ELIGIBLE	\$3,894
AVG. MO. \$/ELIGIBLE	\$324

⁽¹⁾ Does not include Audits & Lawsuits, Recoveries, and Mental Health Services.

Excluded policy changes: 32. Refer to page following report for listing.

Last Refresh Date: 05/10/2006 CY Page 16 of 17

^{***} Eligibles include the estimated impact of eligibility policy changes.

EXCLUDED POLICY CHANGES: 32

1	FAMILY PLANNING INITIATIVE
2	BREAST AND CERVICAL CANCER TREATMENT
3	CHDP GATEWAY - PREENROLLMENT
4	BRIDGE TO HFP
6	BCCTP RETROACTIVE COVERAGE
7	MEDI-CAL TO HF ACCELERATED ENROLLMENT
22	CDSS SHARE OF COST PAYMENT FOR IHSS
51	HOSP FINANCING - DPH AND NDPH DSH PMT
56	HOSP FINANCING - SAFETY NET CARE POOL
58	HOSP FINANCING - PRIVATE DSH REPLACEMENT
59	DSH PAYMENTS
61	HOSP FINANCING - PRIVATE HOSPITAL SUPP PMT
62	CAPITAL PROJECT DEBT REIMBURSEMENT
64	HOSPITAL OUTPATIENT SUPPLEMENTAL PAYMENT
66	HOSP FINANCING-DPH PHYSICIAN & NON-PHYSICIAN
67	MEDI-CAL TCM PROGRAM (Misc. Svcs.)
70	FFP FOR LOCAL TRAUMA CENTERS
72	CERTIFICATION PAYMENTS FOR DP-NFS
74	HOSP FINANCING - DISTRESSED HOSPITAL FUND
77	L.A. COUNTY MEDICAID DEMO. PROJ. (Misc. Svcs.)
81	HEALTHY FAMILIES - CDMH
85	DSH OUTPATIENT PAYMENT METHOD CHANGE
86	MINOR CONSENT SETTLEMENT
88	VOLUNTARY GOVERNMENTAL TRANSFERS
89	SRH OUTPATIENT PAYMENT METHOD CHANGE
92	HOSP FINANCING - NDPH SUPPLEMENTAL PMT
119	CANTWELL MEDICAL PHARMACY AUDIT SETTLEMT
123	SERONO AND U.S. AFFILIATES SETTLEMENT
126	FAMILY PACT DRUG REBATES
141	HOSP FINANCING - CCS AND GHPP
143	HURRICANE KATRINA SECTION 1115 WAIVER
148	MEDI-CAL/HE BRIDGE PERFORMANCE STANDARDS